

Gates County High School
Finance Department
Vendor Payments/Reimbursements/Fund Transfers

Use This Section For Payments To A Vendor (Please Attach Invoices)

Vendor _____

Activity _____

Not To Exceed The Following Amount \$ _____

Reason _____

Use This Section For Reimbursements (Please Attach Receipts)

_____Supplies/Materials

_____Books

_____Other
Please specify _____

Amount \$ _____

Use This Section For Fund Transfers

Transfer From Account No. _____

Transfer To Account No. _____

Amount \$ _____

Account No. _____ (Must be completed before being submitted)

Signature of Requester _____ Date _____

Principal _____ Date _____